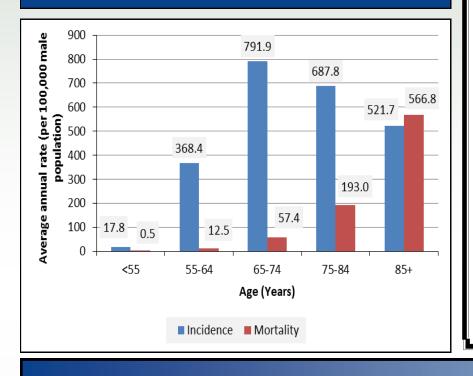
February 2015

Prostate Cancer in Nebraska

Figure 1. Prostate Cancer Incidence and Mortality, by Age, Nebraska (2007-2011)



Nebraska Prostate Cancer Quick Facts:

- Between 2007 and 2011, 6,292 Nebraska men were diagnosed with prostate cancer, and 937 Nebraska men died from it.
- The rate at which prostate cancer occurs (incidence) peaks between 65 and 74 years of age and then declines. Prostate cancer deaths (mortality) increase steadily with age. (Figure 1).
- Prostate cancer incidence and mortality fell significantly during the past decade, both in Nebraska and nationwide (Figures 2 & 3).
- Prostate cancer incidence and mortality rates in Nebraska are similar to U.S. rates (Figures 2 & 3).

Figure 2. Prostate Cancer Incidence, by Year of Diagnosis, Nebraska & U.S. (2001-2011)

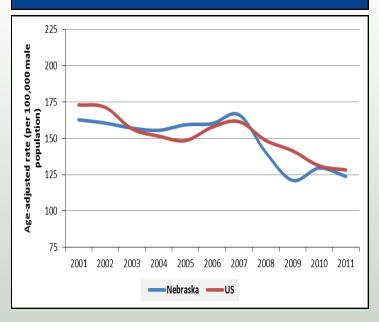


Figure 3. Prostate Cancer Mortality, by Year of Death, Nebraska & U.S. (2001-2011)

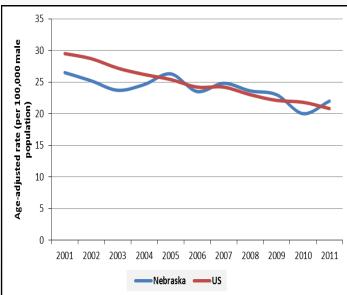
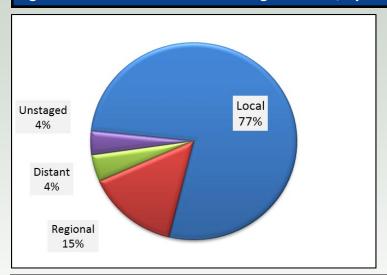


Figure 4. Prostate Cancer: Percentage of Cases, by Stage of Disease at Diagnosis, Nebraska, 2007-2011



- Between 2007 and 2011, the majority (77%) of Nebraska prostate cancer cases were diagnosed at a local stage of disease (Figure 4).
- Stage of disease at diagnosis strongly affects the prognosis for prostate cancer patients. The most recent national data show that the 5-year survival rates for prostate cancer were nearly 100% for both local and regional stage diagnoses, but fell to 27.9% for later stage (distant) cases.

Prostate Cancer Risk Factors and Screening

- Risk factors for prostate cancer include age (50+), African American race, and family history of prostate cancer. Other lifestyle and genetic factors are under study but their role in prostate cancer development remains unclear.
- During the decade of 2002-2011, the prostate cancer incidence rate was significantly higher among African American men
 in Nebraska (188.0 diagnoses per 100,000 men per year) compared to whites (143.1), while the mortality rate for Nebraska's African American men (41.8 deaths per 100,000 men per year) was nearly double that of whites (23.7).
- The American Cancer Society (ACS) recommends that physicians discuss the potential benefits and limitations of screening for prostate cancer with their male patients who are 50 years of age and older and who can expect to live at least 10 more years. African American men and men with a family history of prostate cancer are at an increased risk for prostate cancer and should discuss screening earlier, starting at age 45. For those who choose to be screened, the ACS recommends a prostate-specific antigen (PSA) test every year (less frequently depending on results) and an optional digital rectal exam.

About the Nebraska Cancer Registry

The purpose of the Nebraska Cancer Registry (NCR) is to gather data that describe how many Nebraska residents are diagnosed with cancer, what types of cancer they have, the treatment they receive, and survival after diagnosis. The NCR collects this information from every hospital in the state (excluding US Veteran's Administration facilities), pathology laboratories, radiation therapy sites, outpatient surgery facilities, physicians' offices, death certificates, and cancer registries in neighboring states. The NCR works closely with the Comprehensive Cancer Control Program of the Nebraska Department of Health and Human Services (NDHHS) and the Nebraska Cancer Coalition to provide data for planning and evaluating cancer control initiatives throughout the state, and has provided data critical for developing the Nebraska Comprehensive Cancer Control Plan. The NCR is managed by NDHHS and data are collected by the Nebraska Methodist Hospital of Omaha.

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To learn more about the Nebraska Cancer Registry, or to view additional fact sheets and reports, visit: http://dhhs.ne.gov/publichealth/Pages/ced_cancer_data.aspx.